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Under the Paperwork Reduction Act of 1995.	Applic	cation Number	10/696,671		mess in					
TRANSMITTAL FORM (to be used for all correspondence efter Initial filing) Total Number of Pages in This Submission 12		Date	October 28	October 28, 2003						
		Named Inventor	Robert D. I	Robert D. Ivarie						
		nit	1633	1633						
		iner Name	Kaushal, S	Kaushal, Sumesh						
		ney Docket Number	AVI-000CC	AVI-000CON						
ENCLOSURES (Check all that apply)										
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Petition Petition Provisio Power of Change Termina Reques CD, Nui	ig-related Papers to Convert to a mal Application of Attorney, Revocat of Correspondence al Disclaimer t for Rafund mber of CD(s)	e Address		Appeal of Appeal (Appeal (Appeal Propriet)	Enclosure(s) (please Identify				
SIGNA	TURE OF AP	PLICANT, ATT	ORNEY, C	R AGE	ENT					
Firm Name AviGenics, Inc.	. /		-		-					
Signature Sile Bullan										
Printed name Kyle Yesland										
Date December 19, 2007	December 19, 2007 Reg. No. 45528									
CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.										
Signature The Bull										
Typed or printed name Kyle Yesland					Date	December 19, 2007				

This collaction of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-07) Approved for use through 05/30/2010. OMB 0651-0032

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Effective on 12/08/2004. Fees pursuent to the Consolidated Appropriations Act. 2005 (H.R. 4818).			Complete if Known							
·			Application Number	10/696,67	71					
FEE TRANSMITTAL For FY 2008 P Applicant claims small entity status. See 37 CFR 1.27			Filing Date	October 2	28, 2003					
			First Named Invento	r Robert D	. Ivarie					
					Sümesh					
			Art Unit	1633						
TOTAL AMOUNT OF	PAYMENT (\$)	525.00	Altomey Docket No	. AVI-0000	CON					
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
Deposit Account Deposit Account Number: 501729 Deposit Account Name: AviGenics, Inc.										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee										
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.										
FEE CALCULATION	DN									
BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES . SEARCH FEES EXAMINATION FEES										
Application Type		mall Entity Fee (\$) Fee	Small Entity (\$) Fee (\$)		Entity (\$) Fees Paid (\$)					
Utility	310	155 510	_ ~~~	210 10						
Design	210	105 .100			5					
Plant	210	105 310			30					
Reissue	310	155 510		620 31						
Provisional	210	105			0					
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissucs) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. Sec 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Fee (\$) Fee (\$) Fee Paid (\$)										
- 100 = /50 = (round up to a whole number) x =										
Other (e.g., late filing surcharge):										
SUBMITTED BY	Bl 34	-11	Registration No. 455	OR.	Telephone 706-227-1170 ext 233					
Signature (Rid ATT 10)	Date December 19, 2007									
Name (Print/Type) Kyl	e resiano									

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